

# **CITY OF NEWPORT**

DEPARTMENT OF FINANCE AND ADMINISTRATION LICENSE DIVISION 859-292-3660

## CN-2

# APPLICATION FOR OCCUPATIONAL LICENSE

1	NAME OF APPLICANT										
	TRADE NAME OR DBA										
	ADDRESS	Telephone No	Telephone No								
	NEWPORT LOCATION (STREET)										
	MAILING ADDRESS (IF DIFFERENT FROM NEWPORT LOCATION)										
	STREET	CI	TY		STATE	ZIP					
	DATE OPERATION INTENDED TO START_										
2	CHECK TYPE OF OWNERSHIP CORPORATION SOLE OWNER PARTNERSHIP CORPORATION INFORMATION If vendor is a corporation, please list corporate name exactly as it appears on your state and federal income tax return.										
	Corporate name			Date o	f Incorporation						
4	OWNER (S) OF BUSINESS  If an individual, give name, date of birth, residence address, home telephone number and social security number; if a partnership, give name, residence address, home telephone number and social security number and D.O.B. of each partner; if a corporation, give name and address, home telephone number, and social security number of the President Vice-President, Secretary and Treasurer.										
	NAME/ADDRESS		D.O.B	TITLE	RES. TEL. NO.	S.S. #					
5	IDENTIFICATION NUMBERS  Enter any of the following identification numbers which apply to your company.  FEDERAL EMPLOYERS I.D. NUMBER (The number used to file Federal Income Tax)  KENTUCKY ACCOUNT NUMBER (The number used to file Kentucky Income Tax)  SOCIAL SECURITY NUMBER (If you are sole proprietor)										
6	NATURE OF BUSINESS Please describe the business and its operation, including where and how sales, services, and/or any other activities take place. Be specific. Any license issued will be only for those activities outlined in this application. Any expansion beyond these activities is unlawful until a new application is submitted and approved.										
7	Are hazardous materials or guard dogs, pets or o would be necessary or helpful to emergency personal transfer or the second seco			oecify. Give any o	ther information about t	the premises which					
	PAYROLL WITHHOLDING FEE										
•	Will you have employees working in Newpor	rt?	NO Ifvo	s, give the estim	atad numbar						
	The City of Newport also has a withholding limits. It is the responsibility of the business provided. If you wish to have the withholding	fee of 2 $\frac{1}{2}$ % of the growner to withhold the	ss wages pa ese fees and	id to employees submit them to	while they are working the City on a quarter	ly basis. Forms will be					
N	ame										

		be required to fil	e an Annual Repo	rt on Tip I	ncome. The t	ip income which		e receiving earned income equal 8% of the gross	
10	SUB-CONTRAC	TORS							
	Will you be employing Sub-Contractors/Independent Contractors?   YES   NO  If you are employing sub-contractors, Finance Department regulations require that you submit the names, mailing addresses, and a contact person for each sub-contractor/independent contractor. No license can be issued to you until all sub-contractors are accounted for. Use form CN-5 to list this information.								
				-	-			rein are true and correct.	
				Signed X	<u> </u>		<b></b>		
				Official	l'itle		_Date		
11	NEWPORT B	USINESS LOCA	TION APPROVA	L					
			in Newport, your issued to you unt				approved by the	following city	
	X				-				
	Building Inspe	ector							
	Fire Inspector								
						OF THE LICENApprovedApproved CoiDenied (notification)	nditionally (cond		
					Dated this_	day of		, 20	
12	AMOUNT OF	LICENSE FEE	DUE						
			SIDE Newport, the of fees is as follow		of license fee	is based on the m	onth of the city's	s fiscal year in which the	
	JULY 1 - AUG 1 - SEPT 1 - OCT 1 - NOV 1 - DEC 1 -	JUNE 30 = JUNE 30 = JUNE 30 = JUNE 30 = JUNE 30 = JUNE 30 =	\$75.00 \$68.75 \$62.50 \$56.25 \$50.00 \$43.75						
	ANY DATE B	ETWEEN JANU	ARY 1 AND JUN	E 30 = \$37.	50				
B. If your business is located OUTSIDE Newport the amount of fee is based on the following criteria:									
	1) If the estimated value of contracts you will receive in Newport (minus any amount sub-contracted to other companies) than \$21,428.00, pay the fees as outlined above (A).								
	2) If the estimated value of the contracts you will receive to work in Newport (minus any amounts sub-contracted to or companies) is more that \$21,428.00, you should multiply the amount of contracts by 3 ½ 10 of one percent (.0035) and amount.								
			sidered an estimat vments may be du					ir project is completed.	
	All fees an	re payable when	application is filed	l.					
AN	Y LICENSE ISS	UED TO YOU	WILL EXPIRE	JUNE 30,	·				

TIP INCOME

The purpose of **FORM CN-2** is for the filing of an initial application for an Occupational License from the City of Newport for businesses/persons who have not been licensed to do business in the City for the last fiscal year. Newport's fiscal year runs from July 1 of one year to June 30 of the next.

Pursuant to City Ordinance all persons doing business within the defined limits of the City of Newport, Kentucky must have an Occupational License to do so whether or not they have an actual business location within the City of Newport.

Businesses/persons, which do have an actual physical location within the City of Newport, must have their application approved by the City's Building, Zoning, and Fire Departments. These inspections will be arranged for you. Please place on the application form a phone number where you can be reached during the hours of 8:00AM and 4:30PM Monday through Friday. A City Building Inspector will contact you to arrange these inspections.

Persons operating a business out of their personal residence can be approved for an occupational license to do so subject to certain zoning restrictions. Persons operating a business out of their personal residence can only be approved to utilize their residence as their office to establish a telephone number and mailing address. Persons operating a business out of their personal residence cannot do any of the following:

- Place any signs on the property indicating that a business is being operating there.
- Operate any type of retail business that is open to the public.
- Have any employees working for their business out of their residence.
- Store any materials related to the operation of the business in the yard or drive way. All materials must be stored inside the property or in a garage or other storage facility.

Violation of any of these restrictions can result in your business license being revoked.

## LEASE REQUIREMENT

Regardless of the location of your business, if you do not own the property out of which the business will be operated, you must file a copy of a lease agreement signed by the property owner indicating the owner's approval for you to operate a business there. If you do not have a written lease, then another written statement must be signed by the property owner and filed with your application.

#### **FEES**

To calculate the amount of fee to file with your application form, please refer to Section 12 on the second page of the form for the proper calculation.

## **RENEWALS**

Any license issued from an initial application form will expire on June 30 of any year. If you wish to file a return for the **Renewal** of an existing license, please go to **FORM CN-16**.

The filing date for renewals is April 15 for businesses on a calendar year and 105 days after the end of any fiscal year.

#### **OPERATING WITHOUT A LICENSE**

Pursuant to City Ordinance any business/person who begins operating their business or performing a contractual service in the City without first obtaining a license from the City's Finance Department can be assessed a license fee that is double the amount normally due.

# ALCOHOLIC BEVERAGES

Any business/person that choose to include the sale of alcoholic beverages in their business must acquire separate licenses from both the City of Newport and Commonwealth of Kentucky to do so. These forms can be obtained by calling the Office of the Alcoholic Beverage Control Administrator at 859-292-3660.